

DEPARTMENT OF HOMELAND SECURITY U.S. COAST GUARD CG-4423 (Rev. 3-03)		APPLICATION FOR APPROVAL OF MARINE EVENT		DATE SUBMITTED	
INSTRUCTIONS 1. Submit this form in Triplicate. Please complete on a typewriter or print in black ink <i>(to permit reproduction)</i> . 2. This application must reach the District Office at least 30 days prior to the event. 3. Attach a section of a chart or a scale drawing showing boundaries and/or courses and markers contemplated. 4. Submit a copy of your entry requirements, and any special rules pertaining to equipment, rigs or procedures.			13. HAVE ANY OBJECTIONS BEEN RECEIVED FROM OTHER INTERESTED PARTIES? <input type="checkbox"/> NO <input type="checkbox"/> YES <i>(Explain)</i>		
1. NAME OF EVENT			2. DATE OF EVENT		15. DOES THE SPONSORING ORGANIZATION DEEM THEIR PATROL ADEQUATE FOR SAFETY PURPOSES? <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(Explain)</i>
3. LOCATION		4. TIME <i>(from, to)</i>			
5. NAME AND ADDRESS OF SPONSORING ORGANIZATION <i>(Include Zip Code)</i>			16. IS A COAST GUARD OR COAST GUARD AUXILIARY PATROL REQUESTED FOR CONTROL OF SPECTATOR AND/OR COMMERCIAL TRAFFIC? <i>(If YES, how many vessels do you recommend, and why?)</i> <input type="checkbox"/> NO <input type="checkbox"/> YES		
6. NO. PARTICIPANTS		7. SIZES OF BOATS		17. PERSON IN CHARGE	
8. TYPES OF BOATS		9. NO. SPECTATOR CRAFT		18. WHERE WILL "PERSON IN CHARGE" BE DURING THE EVENT?	
10. DESCRIPTION OF EVENT			19. HOW CAN "PERSON IN CHARGE" BE CONTACTED DURING THE EVENT?		
10. DESCRIPTION OF EVENT			20. PERSON TO BE CONTACTED FOR FURTHER DETAILS <i>(Name, address, Zip code)</i>		
			AREA CODE AND TELEPHONE NO. —→		
			The undersigned has full authority to represent the sponsoring organization		
11. WILL THIS EVENT INTERFERE OR IMPEDE THE NATURAL FLOW OF TRAFFIC? <input type="checkbox"/> NO <input type="checkbox"/> YES <i>(Explain)</i>			21. SIGNATURE		22. TITLE
12. WHAT EXTRA OR UNUSUAL HAZARD <i>(to participants or non-participants)</i> WILL BE INTRODUCED INTO THE REGATTA AREA?			23. ADDRESS <i>(Include Zip code)</i> AREA CODE AND TELEPHONE NO. —→		
12. WHAT EXTRA OR UNUSUAL HAZARD <i>(to participants or non-participants)</i> WILL BE INTRODUCED INTO THE REGATTA AREA?			24. TO: _____ _____ _____ _____ _____		